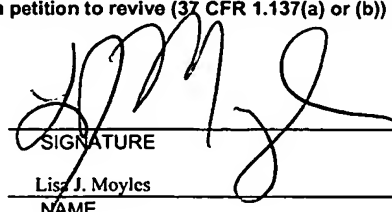


TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER 2857 (203-3424)
INTERNATIONAL APPLICATION NO. PCT/US2003/024201	INTERNATIONAL FILING DATE 31 July 2003	U.S. APPLICATION NO. (known, see 37 CFR 1.5) To Be Assigned 10/522914 PRIORITY DATE CLAIMED 31 July 2002
TITLE OF INVENTION TOOL MEMBER COVER AND COVER DEPLOYMENT DEVICE		
APPLICANT(S) FOR DO/EO/US Richard D. GRESHAM		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371. 2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371. 3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below. 4. <input checked="" type="checkbox"/> The US has been elected (Article 31). 5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). 6. <input type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)). a. <input type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). 7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. 8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). 9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)). 10. <input type="checkbox"/> An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). Items 11 to 20 below concern document(s) or information included: 11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98. 12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included. 13. <input checked="" type="checkbox"/> A preliminary amendment. 14. <input type="checkbox"/> An Application Data Sheet under 37 CFR 1.76. 15. <input type="checkbox"/> A substitute specification. 16. <input checked="" type="checkbox"/> A power of attorney and/or change of address letter. 17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821- 1.825. 18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4). 19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4). 20. <input checked="" type="checkbox"/> Other items or information.		

Return Postcard, Cert Express Mail EJ853409540US, Fee Transmittal, PCT Request 7/23/2003 (6 pgs), Pct Pub. (cover pg ONLY), PCT/IB/318 (2 pgs), PCT/IB/308 dated 2/05/2004 (1 pg)

This collection of information is required by 37 CFR 1.414 and 1.491-1.492. The information is required to obtain or retain a benefit by the public, which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 15 minutes to complete, including gathering information, preparing, and submitting the completed form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

U.S. APPLICATION NO. (if known, see 37 CFR 1.5) To Be Assigned 10/522914		INTERNATIONAL APPLICATION NO. PCT/EP2003/008067		ATTORNEY'S DOCKET NUMBER 2857 (203-3424)	
21. The following fees are submitted:				Applicant use	Office use only
<input checked="" type="checkbox"/> a) Basic national fee..... \$300.00				\$ 300.00	
<input checked="" type="checkbox"/> b) Examination fee..... \$200.00				\$ 200.00	
<input checked="" type="checkbox"/> c) Search fee..... \$500.00				\$ 500.00	
TOTAL OF ABOVE CALCULATIONS = \$1000.00				\$ 1,000.00	
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE		
28	- 100 = 0.00	/50 =	x \$250.00	\$ 0.00	
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	\$	
Total claims	26 - 20 =	6.00	x \$50.00	\$ 300.00	
Independent claims	2 - 3 =	0.00	x \$200.00	\$ 0.00	
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360.00	\$ 0.00	
TOTAL OF ABOVE CALCULATIONS =				\$ 300.00	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by 1/2.				\$	
SUBTOTAL =				\$ 1,300.00	
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+	\$
TOTAL NATIONAL FEE =				\$ 1,300.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				+	\$ 40.00
TOTAL FEES ENCLOSED =				\$ 1,340.00	
Amount to be refunded:					\$
Amount to be charged					\$ 1,340.00
<p>a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.</p> <p>b. <input checked="" type="checkbox"/> Please charge my Deposit Account No. <u>21-0550</u> in the amount of \$ <u>1,340.00</u> to cover the above fees. A duplicate copy of this sheet is enclosed.</p> <p>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>21-0550</u>. A duplicate copy of this sheet is enclosed.</p> <p>d. <input type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>					
<p>NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the International Application to pending status.</p> <p>SEND ALL CORRESPONDENCE TO:</p> <p>United States Surgical, a division of TYCO Healthcare Group, LP 150 Glover Avenue Norwalk, CT 06856</p>					
				<p>SIGNATURE</p> <p></p> <p>Lisa J. Moyles</p> <p>NAME</p> <p>Reg. No. 40,737</p> <p>REGISTRATION NUMBER</p>	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	To Be assigned
		Filing Date	Concurrently Herewith
		First Named Inventor	Richard D. Gresham
		Examiner Name	To Be Assigned
		Art Unit	To Be Assigned
TOTAL AMOUNT OF PAYMENT (\$) \$1,340.00		Attorney Docket No.	2857 (203-3424)

METHOD OF PAYMENT (check all that apply)

☐ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☒ Deposit Account
 Deposit Account Number: 21-0550
 Deposit Account Name: United States Surgical

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	\$1,000.00
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 26 - 20 or HP = 6.00 x \$50.00 = \$300.00
 HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 2 - 3 or HP = \$0.00 x \$200.00 = \$0.00
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>28</u>	<u>0</u>	<u>0</u> / 50 = <u>0</u> (round up to a whole number)	<u>\$0.00</u>	<u>\$0.00</u>

4. OTHER FEE(S)

Description	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge): <u>Recording the Assignment (37 CFR 1.21(h))</u>	<u>\$40.00</u>

SUBMITTED BY

Signature	Registration No. (Attorney/Agent) <u>40,737</u>	Telephone (203) <u>845-1941</u>
Name (Print/Type) <u>Lisa J. Moyles</u>		Date <u>1/28/05</u>

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DOCKET NO. 2857
(203-3424)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Richard D. Gresham

Serial No.: To Be Assigned

Art Unit: To Be Assigned

Filed: Concurrently Herewith

Examiner: To Be Assigned

For: **TOOL MEMBER COVER AND COVER DEPLOYMENT DEVICE**

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to new Rule 37 CFR 1.32(c)(3), the following 10 (ten) patent practioners are to be recognized as being of record:.

MARK FARBER, Reg. No. 34,159; **KIMBERLY V. PERRY**, Reg. No. 43,612; **LISA J. MOYLES**, Reg. No. 40,737; **BRIAN LEFORT**, Reg. No. 43,747; and **PAUL AUDET**, Reg. No. 26,439; each of them of United States Surgical, a division of **TYCO HEALTHCARE GROUP LP**, 150 Glover Avenue, Norwalk, Connecticut 06856; and

DAVID M. CARTER, Reg. No. 30,949; **PETER DELUCA**, Reg. No. 32,978; **RAYMOND E. FARRELL**, Reg. No. 34,816; and **CHRISTOPHER G. TRAINOR**; each of them of **CARTER, DELUCA, FARRELL & SCHMIDT LLP**, 445 Broad Hollow Road, Suite 225, Melville, New York 11747.

Respectfully submitted,

Date: 1/27/05
United States Surgical, a division of
TYCO Healthcare Group, LP
150 Glover Avenue
Norwalk, CT 06856

By: Paul R. Audet
Paul R. Audet
Reg. No. 26,439
Attorney for Applicant

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Richard D. Gresham

Serial No.: To Be Assigned

Art Unit: To Be Assigned

Filed: Concurrently Herewith

Examiner: To Be Assigned

For: TOOL MEMBER COVER AND COVER DEPLOYMENT DEVICE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450
Mail Stop New Application

CERTIFICATE OF EXPRESS MAILING

"Express Mail" Mailing Label No.: EJ853409540US

Date of Deposit: January 28, 2005

I hereby certify that the following:

- [x] This Certificate of Mailing
- [x] Patent Application consisting of 17 pages
- [x] 11 sheets of drawings (formal)
- [x] Transmittal Letter (2 pages)
- [x] Fee Transmittal for FY 2005 (1 page)
- [x] Preliminary Amendment (7 pages)
- [x] Combined Declaration & Power of Attorney (4 pages)
- [x] Additional Sheet to Combined Declaration & Power of Attorney (1 page)
- [x] Recordation Cover Sheet (1pages)
- [x] Assignment (2 pages)
- [x] Form PCT/IB/308 (1 page)
- [x] Form PCT/IB/318 (2 pages)
- [x] International Publication Number (cover page)
- [x] PCT Request (Form PCT/RO/101) (6 pages)
- [x] Return Postcard

are being deposited with the United States Postal Services under 37 CFR Section 1/10 on the Date of Deposit indicated above in an envelope as "Express Mail Post Office to Addressee" Mail Label Number .: EJ853409540US addressed to Mail Stop New Application, U.S. Patent & Trademark Office, PO Box 1450, Alexandria, VA 22202-1450.


Susan S. Rickard

U.S. Surgical, a division of
TYCO HEALTHCARE GROUP LP
150 Glover Avenue
Norwalk, Connecticut 06856
(203) 845-4489